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CONFIRMATION NO. 5233

SERIAL NUMBER 10/611,585	FILING DATE 07/01/2003 RULE	CLASS 326	GROUP ART UNIT 2819	ATTORNEY DOCKET NO. 13693US02
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APPLICANTS

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** CONTINUING DATA ***** *hl yes*

This appln claims benefit of 60/402,770 08/12/2002
and claims benefit of 60/402,771 08/12/2002

** FOREIGN APPLICATIONS ***** *hl none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/25/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY AZ	SHEETS DRAWING 4	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature <i>me</i> Initials <i>me</i>			

ADDRESS

23446
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TITLE

Method and circuit for reducing HCI stress

FILING FEE RECEIVED 1020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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